

# People Live in Houses

Profiles of Community  
Residences

Retarded Children  
and Adults

PRESIDENT'S COMMITTEE ON MENTAL RETARDATION



## PRESIDENT'S COMMITTEE ON MENTAL RETARDATION

The President's Committee on Mental Retardation was established by Executive Order of the President in 1966.

The Committee is composed of a chairman, 21 citizen members and five ex-officio members, appointed by the President to advise him on what is being done for the mentally retarded; to recommend Federal action where needed; to promote coordination and cooperation among public and private agencies; to stimulate individual and group action; and to promote public understanding of the mentally retarded.

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# PEOPLE LIVE IN HOUSES

Profiles of Community Residences  
for Retarded  
Children and Adults

DHEW No. (OHD) 75-21006

PRESIDENT'S COMMITTEE ON MENTAL RETARDATION  
Washington, D.C. 20201

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*"The mentally retarded are people.  
People do not live in institutions or  
facilities. People live in houses."*

—JENS MALLING PEDERSEN  
*Danish Architect*

Drawings from Residential Service Projects  
Booklet, Ohio Division of Mental Retardation  
and Developmental Disabilities

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## FOREWORD

For generations, the primary concept of residential service for mentally retarded people has been terminal placement in an institution. Professionals, beginning with the family doctor and clergy, would frequently advise parents that their retarded child be separated from family and community—"for the good of everyone concerned." Most parents, even when they wanted desperately to keep their child at home, were faced with the realization that limited supportive services were available.

Public institutions, many built in the 1800s, were usually far removed from the community and natural home, were full beyond their original capacity, and were understaffed. In the majority of institutions, a three-year wait for admission was considered the optimum to hope for. The States' answer to the growing waiting lists was to build new institutions or to enlarge existing ones.

Beginning in the 1960s, in a culmination of concern by parents, the public, professional groups, and a President whose sister was retarded, the climate began to change. In two action-packed years, President John F. Kennedy issued the first Message to Congress on Mental Illness and Mental Retardation; the President's Panel published its report, *National Action to Combat Mental Retardation*; there was a White House Conference on Mental Retardation, and Congress passed major legislation supporting research and services.

The past decade has seen a dramatic reassessment of retarded people's needs and rights as citizens and of their potential to function in the community. More recently, there has been significant development of community-based residential facilities and services for retarded children and adults—a national movement which constitutes one of this century's most dramatic trends in the field of human services.

Progressive States have begun to change their traditional custodial role by initiating innovative programs that prepare residents for the transition to community placement; satellite agencies and regional centers have appeared on the community scene; supportive services, based in the community, are increasing; public special education classes and developmental services have expanded to include much younger children and older adults of all levels of retardation; and the transition from the institution to the community has become a reality for several thousand individuals.

There is now demonstrable evidence that retarded people can live successfully in the community in several types of residential alternatives to institutions: their own homes, foster care or adoptive homes, small group homes, hostels and independent community residential settings. Provided with training and guidance, a large majority are earning their living as well as the respect of their neighbors.

This publication illustrates some examples of the above-mentioned types of community residential programs, with guidelines on applicability for different age groups. Residences in both urban and rural settings, which serve persons with many types of handicapping conditions, are presented. Application of the principle of normalization and variations in funding and in the delivery of services were also considerations in the selection. Cost figures are subject to changing economic conditions and should be regarded as offering only broad guidelines.

The contributions to this book of Miles Santamour, principal author, and Mrs. Marianna Paige, researcher, deserve special acknowledgement.

It is the purpose of these profiles of community residences to provide planners and administrators with resource information on

a variety of appropriate settings, from which adaptations can be made to fit specific community needs.

We hope that it will also stimulate legislators, parents and community leaders to continue to be innovative and to broaden the range of community services for retarded infants, children and adults.

Where meaningful community residential services are provided, parents of retarded

children and adults will not need to face the ordeal of forced separation. They can expect that their retarded child will some day live away from home but not necessarily in an institution. For many retarded citizens it means they may have a choice of living in the community and being a part of our American society.

FRED J. KRAUSE  
*Executive Director*

## INTRODUCTION

It is meaningful that innovative systems of community residential services for retarded people are emerging throughout the nation and the world. Although the programs and residences contained in this book are not necessarily approved by any set of national or world standards, they are examples of the types of community residential arrangements available to retarded citizens at this time in history.

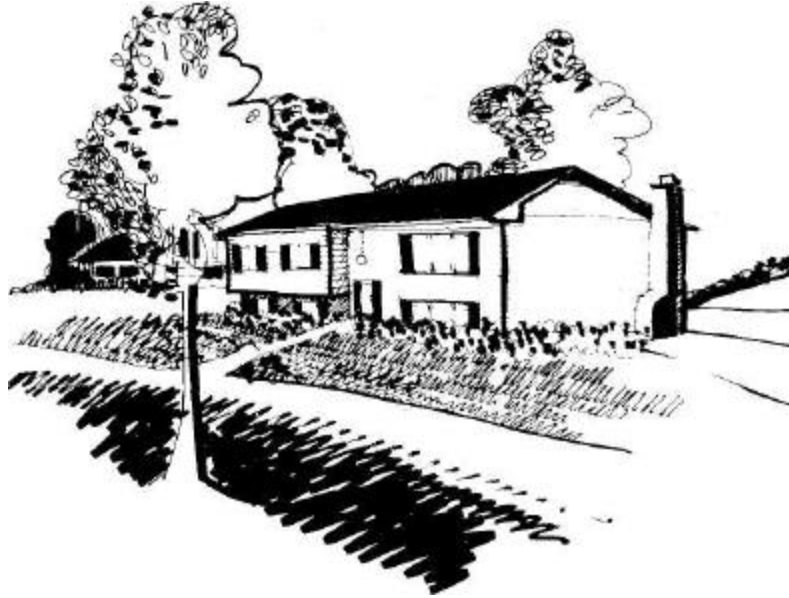
Information has been gathered with the valuable help of many individuals, groups and agencies. Their inclusion here does not imply Federal approval.

This book presents only profiles of some of the alternatives to institutional residency. It is divided into three main sections: (1) for infants and children, (2) for adults, and (3) for older adults. Each section is preceded by philosophy and observations which influence the use of alternatives.

There are many barriers that confront individuals and groups in establishing community residential programs. In addition to zoning, health, and safety regulations, there are community attitudes which hinder the establishment of programs. There are also various licensing requirements which regulate staffs and program content. (See The National Association for Retarded Citizen's *The Right to Choose*.)

Also, the Center for Human Development at the University of Oregon has recently completed a nationwide study of community group residences. The study compares various aspects of programs operated by private non-profit groups, public or government agencies, and private profit-making individuals or corporations.





# Community Residences for Infants and Children

Retarded infants and children, no matter how severe their condition, like all infants and children, need the comfort, security and nurturing of an accepting family unit. Recognizing that in many situations it is not in the best interest of the child or family to keep him at home, the residence of choice for all infants and young children should be their natural home with available supportive developmental and respite services.

Second in choice of proper living arrangements for this age group would be adoptive homes and third, family foster care. As a child matures or if his personality is such that he is unable to accept parent and sibling substitutes, community-based group foster care or small group living units of one nature or another, would follow as preferred placements. Often the use of temporary substitute homes, training units or corrective community group residential facilities, can accelerate the developmental process or curb or reverse destructive behavior.

It is generally accepted in the human services fields that small group living for all infants and children and for most adults contributes to contentment and stimulates development. Interaction with a small group is important in the development of a person's sense of self and his sense of worth; which, when in balance, can lead the individual to perceive himself in relationship to the larger society.

Attainment of a healthy sense of self and a constructive sense of worth is very difficult for all people with handicaps; for people who are retarded and often multi-handicapped, it is more difficult. Small group living for them takes on even a greater significance.



Because knowledge of the nature of retardation has increased, new techniques in dealing with the effects have developed. The stigma attached to retardation has lessened and there has been a phenomenal increase in the number of community based supportive, developmental and respite care programs. Infants and children who were once placed in large State institutions are now able to remain in the community. Even the most severely handicapped, because of community-based medical and para-medical services, are able to remain at home or reside in substitute homes.

# Natural Home

*professional support for infants at home*



RETARDED INFANTS SERVICES, INC.  
836 Park Avenue South New York, New  
York 10016

More and more families are enabled to keep retarded infants and children at home through agencies like Retarded Infants Services of New York City. One such parent wrote an article for the *Chelsea-Clinton News* about her four-year-old son and the help he was receiving from a "home aide" from R.I.S.

The mother explained that medical professionals just one and one-half-years ago had advised her to "put the child away—immediately." Because of the home aide's professional techniques, patience, and her "sensitive, gentle approach," her son now feeds himself, dresses himself, performs simple tasks, such as putting his toys away, and has recently been toilet trained.

In the article the mother adds:

*"Sidney is one of the more fortunate retarded children; he is encompassed with love and understanding and is receiving special assistance at an early age. Thousands of other children are not as fortunate. They are retarded children who are being shut away in institutions simply because their natural families are unable to care for them . . . Like Sidney, these children do not belong in institutions . . . With someone to love, understand and help them, many retarded children could learn and play and share their love, just as Sidney does . . ."*



# Adoptive Home

*Non-traditional child welfare agency for placing  
retarded children for adoption*

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SPAULDING FOR CHILDREN

321 Elm Street Westfield, NJ.

07090

Spaulding for Children of New Jersey is a non-profit, incorporated, adoption placement agency specializing in finding families for "hard to place" children. Founded three years ago, the agency was started by adoptive parents who were committed to the belief that all children were adoptable and that there were

couples, who, if given proper assistance and direction, were willing to adopt children of any age or with any handicap. They believe it is a matter of bringing the two needs together by revising a few restrictive laws and updating traditional adoptive policies and practices.



Spaulding accepts referrals nationwide and from Canada. Usually the children are referred from traditional public and private child welfare agencies who have been unable to find suitable adoptive homes. There is a purchase of adoptive service fee paid by the referring agency. Quite often the adoptive child's original State of residence will continue to subsidize the adoptive parents for special medical or educational services which the child may require for as long as he is a minor. These are expenses which heretofore prohibited couples from adopting children. (Thirty-six States have passed variations of this type of subsidy. See list at end of this description).

Most of the children placed by Spaulding are handicapped physically, emotionally or intellectually; many have all three conditions.

Joey is one such case. Joey, age twelve, is an appealing youngster who is hyperactive, poorly coordinated, manipulative, has speech problems and tests (Wisconsin) in the "low sixties." Until age four he lived with his nat-

ural mother and step-father who rejected him and were neglectful. He was surrendered by his parents for adoption, placed in a series of foster care and pre-adoptive homes, all of which were unable to meet Joey's needs for one reason or another. In the fall of 1973 the Browns, a couple in their middle thirties, and their teenage son, responded to Spaulding's search for an adoptive home for Joey.

Mr. Brown is a professor at a nearby college. The family also operates a marina. The family is very receptive to Joey and works closely with the faculty of the public school that he attends. While assisting Joey with his studies, (Mrs. Brown admits it is very frustrating for both of them) she discovered that he has good manual skills. She quickly made use of his interest and abilities and put him to work at the marina. The agency feels the main reason this adoption will be successful is the Brown's freedom of life style, willingness to let Joey work at his own pace, and their understanding of how to channel his interests and abilities.

States subsidizing adoption are:			
1. Alaska	13. Maryland	25. Oregon	
2. California	14. Massachusetts	26. Rhode Island	
3. Colorado	15. Michigan	27. South Carolina (medical subsidy)	
4. Connecticut	16. Minnesota	28. South Dakota	
5. Delaware	17. Missouri	29. Tennessee	
6. Idaho	18. Montana	30. Texas	
7. Georgia	19. Nebraska	31. Utah	
8. Illinois	20. Nevada	32. Vermont	
9. Indiana	21. New Jersey	33. Virginia	
10. Iowa	22. New York	34. Washington	
11. Kansas	23. North Dakota	35. Washington, D.C.	
12. Kentucky	24. Ohio	36. Wisconsin	

# Foster Care

*(Private, non-profit)*

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RETARDED INFANTS SERVICES, INC.  
386 Park Avenue South New York,  
New York 10016

## **R.I.S. Foster Care Plan**

The Smiths have two teenage normal sons and a six-year-old son named Donald, with Down's syndrome. They are now foster parents to Gary, a mentally retarded boy two months younger than Donald. After rejecting the advice of a well meaning physician to "institutionalize" their own child, the Smiths went through the usual period of adjustment that all families with handicapped children go through. As their own child grew and developed far beyond what the doctor had predicted and as their older children became more independent, the Smiths decided to make room in their home for another retarded child. Gary is benefitting from the arrangement and though his first five years were spent in a "children's shelter," he has adjusted easily to the relaxed pace of the Smith home. Gary, who had earlier been diagnosed as functioning within the range of "severe" mental retardation, has shown significant gains during the past year and now tests as "moderately" retarded.

The two six-year-old boys are very compatible and spend most of their time together. The mother admits that they quarrel, but I don't think they squabble as much as my big boys."

The advantages of the **R.I.S.** Plan are many-fold as the director points out in *Children Today*. "The family tends to profit through the provision of companionship for the retarded child," he writes "... A major problem cited by parents is a lack of socialization for the retarded child . . . the normal children are relieved of the burden of being playmates to their retarded sibling . . . the retarded child reaps the benefits of a normal milieu . . . the entire family equilibrium is in balance because parents themselves, anxious to compensate for their child's lack of friends, spend excessive amounts of time and energy trying to become companions."

# Respite Service

*All age groups*

*All degrees of handicap*

*(Private, non-profit)*

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CHILDCARE ASSISTANCE PROGRAM  
FOR SPECIAL CHILDREN, INC. P.O.  
Box 1217 Springfield, Virginia 22151

## **Relief for Parents**

One of the greatest needs among some families who have a retarded member is occasional relief or time away from the care of the retarded person. In Northern Virginia, an agency specifically designed to fulfill that need was founded some years ago and was recently reorganized and revitalized.

The Childcare Assistance Program for Special Children, Inc. (CAPS) has an active board of volunteers and two part-time paid staff. The staff's responsibility is to recruit and train individuals to care for the special needs of mentally and/or physically handicapped persons; handle and refer the requests for service; and to match services of the provider to that of the person who requests service.

The homes are licensed as temporary foster care homes and serve all age groups and handicapping conditions. A fee of \$1.50 per hour; \$15 for a 24-hour day or \$90 per week is charged to the family and is handled directly between the family and the provider. Administrative costs for the most part are the salaries of the two part-time employees. The cost is met by grants from the Mental Health/Mental Retardation Services Boards of Fairfax and Arlington Counties, and Alexandria; the Northern Virginia Association for Retarded Citizens; and private service agencies.

There are currently 125 families registered for service and 15 persons who are cleared to provide service.



# Foster Group Care and Supportive Services

*(Private, non-profit agency)*

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PALM BEACH COUNTY ASSN. FOR  
RETARDED CITIZENS  
213 Comeau Building  
West Palm Beach, Florida 33401

## **Palm Beach County Foster Care and Supportive Services Program**

A professional musician, who is the mother of four young children, has extended her family to include four retarded foster children. Mrs. Jones' newest and youngest child joined the family after having been abused in her first home. In a few months Betsy has progressed from a whining, unresponsive, non-ambulatory child to an alert, four-year-old who is beginning to move and who claps and laughs along with her "brothers and sisters" while her "mother" plays the piano.

The following consortium of service agencies and programs make this situation possible: The Palm Beach County Association for Retarded Children, the Children's Home Society, the YWCA, the Crippled Children's Society, the Palm Beach County Public School System, Holy Trinity Episcopal Church, the Division of Retardation, and the Department of Health. All are involved in helping Betsy and her new family.

Money to operate a daytime child development and educational program is furnished by the M.R. Division to the association which operates the program in a facility provided gratis by the church. The Children's Home Society supervises the home and pays the room and board rate of \$200 a month, with monies which are also provided by the Division. The Public School pays the salary of one of Betsy's teachers and the YWCA operates a special swimming and physical development program. The Crippled Children's Society provides physical, speech and language therapy and the Department of Health provides physicians, service and medicine. Mrs. Jones receives special instructions and support from all of the direct service agencies. She was included in the Association's in-service training program for staff, parents and volunteers, a course which covers the nature of retardation and offers the rudiments of special services to retarded people.

# Community Residential Training Unit

*Five-day / weekend program for severely and profoundly retarded  
(Private, non-profit)*

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ALLEGHENY-EAST MENTAL HEALTH &  
MENTAL RETARDATION CENTER, INC.  
Haven Home 6923 Thomas Boulevard  
Pittsburgh, Pennsylvania 15208

## **Facility, Residents & Staff**

Eight ambulatory, severely and profoundly mentally retarded children between the ages of three and eighteen live at Haven Home in Pittsburgh during the week and return home each weekend. While they are gone, eight others occupy their beds and program positions. All of the young people are able to maintain a position in their family because of a residential behavior shaping program with emphasis on parent training.

What was once a five-unit apartment building is now an 18-room, three-floor, temporary, community residential treatment unit which maintains a modified family milieu.

The home staff includes two sets of house parents, four child care workers, two previously institutionalized assistant child care workers who are moderately retarded, one educational specialist, one food service supervisor and a secretary. Diagnostic, treatment, planning and supervisory services are provided by the parent agency: the Allegheny-East Mental Health & Mental Retardation Center. The staff is augmented by a number of students in training for a variety of disciplines at the community college and general hospital.

## **Program**

The eight weekday children attend public school where they participate in educational, occupational, physical and speech therapy programs. The staff at the residence reinforces the school program and focuses on improving adaptive behavior, developing language skills, establishing appropriate social behavior and self-help skills.

The weekend residents' program has a similar, developmental approach and also includes recreational activities and training in fine and gross motor development.

## **Management**

The facility is leased by the Allegheny-East Mental Health & Mental Retardation Center, a private non-profit corporation, governed by a board of directors. It is licensed by the State Office of Mental Retardation as a "Behavior Shaping Hostel." It is regulated by several local and State health and fire safety codes.

## **Costs**

The home has an annual budget of \$125,000, funded primarily through a State grant for the establishment of group homes. Parents are also charged a sliding scale fee, based on their ability to pay.

# Crisis Assistance Unit

*Sheltered Care Program for all ages and degrees of retardation*

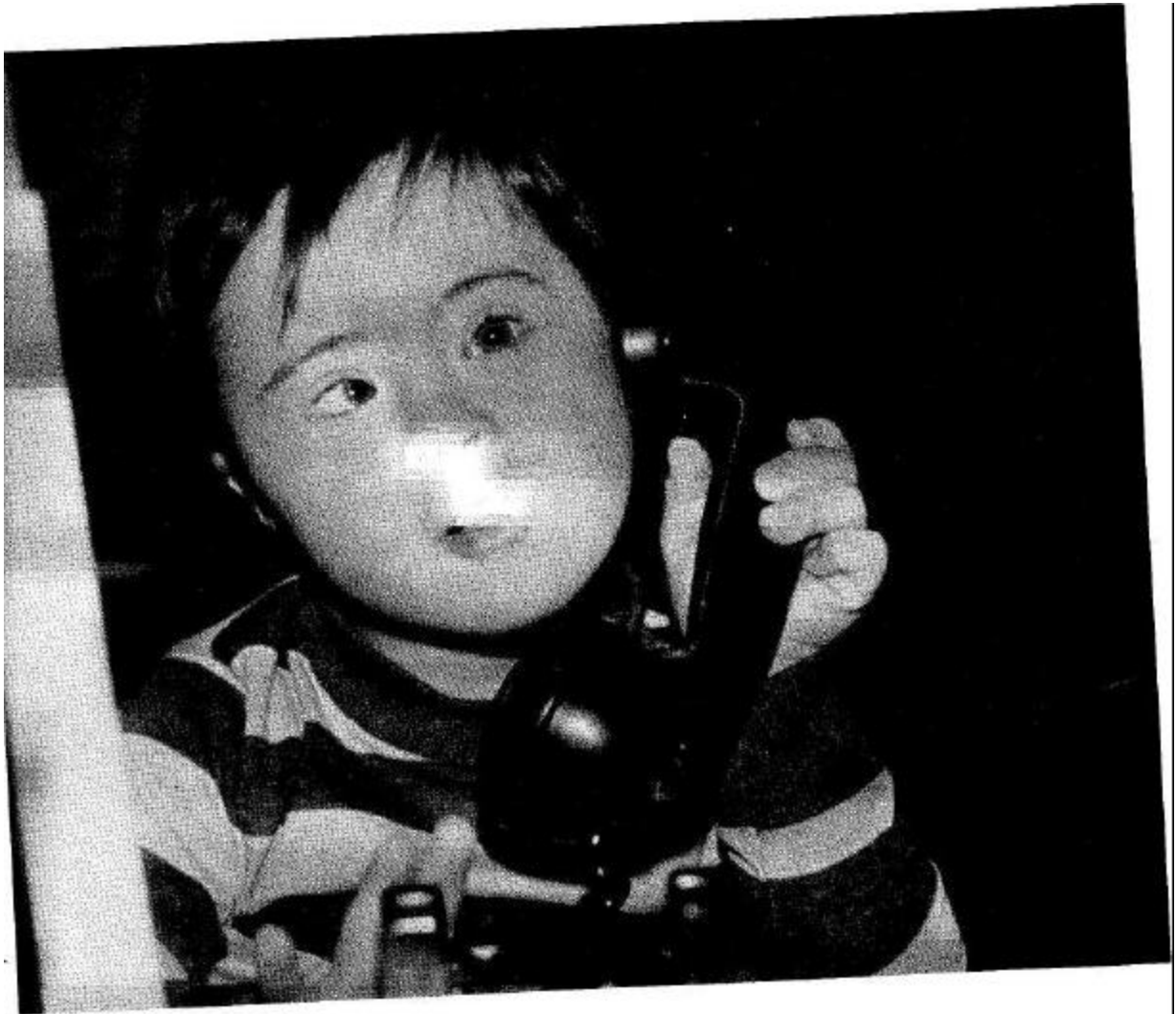
*(Public agency)*

PUBLIC INFORMATION & EDUCATION

ENCOR

116 South 42nd Street

Omaha, Nebraska 68131



## **Facility, Residents & Staff**

The house is medium sized, located in a middle-class neighborhood in Omaha, Nebraska, and looks like any other home on the street. It serves any retarded person in crisis, regardless of age or degree of retardation, until other services can be arranged. It has a total bed capacity of six.

For the most part the residents are under age twelve. The typical crises are divorce, emotional problems of one of the parents, family financial problems, child abuse and neglect. There is a total staff of seven including two house parents, four residential aides and a relief person for the house parents.

## **Program**

During their stay at the crisis unit, the client can continue to go to school, work, or do whatever he has been doing.

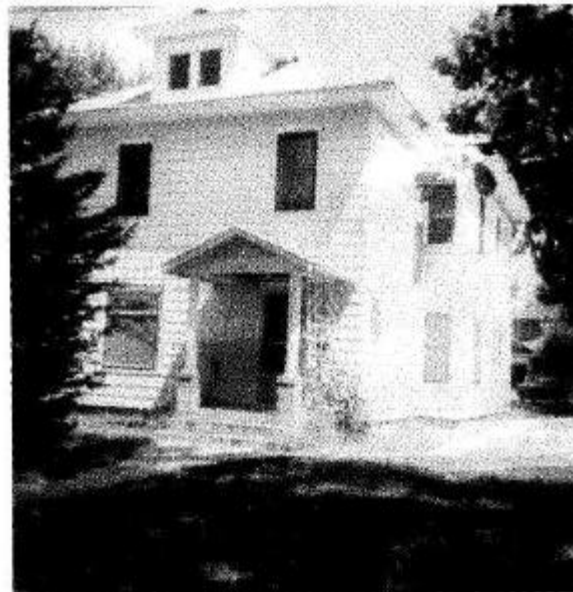
## **Management**

The program is one of many projects run by the Eastern Nebraska Community Office of Retardation. ENCOR is a public agency governed by a board of directors made up of county commissioners from five counties and is Region VI of the State of Nebraska's community-based service system for retarded people. ENCOR contracts with the State of

Nebraska, Department of Public Institutions to provide services. This facility is licensed as a group home by the Department of Public Welfare and meets all local and State fire, health and safety regulations.

## **Costs**

The budget, including some capital outlay, is \$83,909 for fiscal year 1974-75.



# Group Residence

*Retarded children with behavioral problems  
(Public higher education agency)*

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UNIVERSITY OF PUGET SOUND  
GROUP HOMES Education  
Department 1206 North  
Lawrence Tacoma,  
Washington 98416

## **Facility, Residents & Staff**

The two University of Puget Sound Group Homes were initiated for severely retarded and emotionally disturbed children between ten and fifteen years of age, for whom there were no other community residential and educational services.

The two homes, with seven residents in one and eight in the other, are situated within walking distance of the UPS campus. The residences are owned by the university, and had been previously used as student residences. They are leased by the State of Washington's Department of Social and Health Services, Office of Developmental Disabilities. Maintenance of the homes and grounds is included in the lease by the UPS. In appearance, the two homes are typical of those found in the neighborhood, at the moderate income level.

The staff includes an administrator who is responsible for both homes, a set of house parents for each home, a part-time occupational therapist and fifty university student volunteers.



## **Program**

The primary focus is in teaching basic skills that stress independence, and thus help the children to move to group homes with less supervision.

Since there were no educational or residential programs available to this severely retarded and disturbed group of children, a curriculum was designed by the director, incorporating fifty student volunteers from UPS. There is also a part-time occupational therapist. The Tacoma public school now provides special education for the children, along program lines developed by the director and staff of the homes.

## **Management**

While the homes had originally been used as student quarters, a special permit was granted to convert them into "group homes" for handicapped children. The homes are sponsored and administered by the University of Puget Sound, Department of Education, a public higher education "agency."



## **Costs**

In the first two years of operation, educational aspects of the program were funded through Title I and an HEW Staffing Grant along demonstration guidelines. Cost of maintaining the children is funded through the State's Office of Developmental Disabilities at the rate of \$300 each per month.

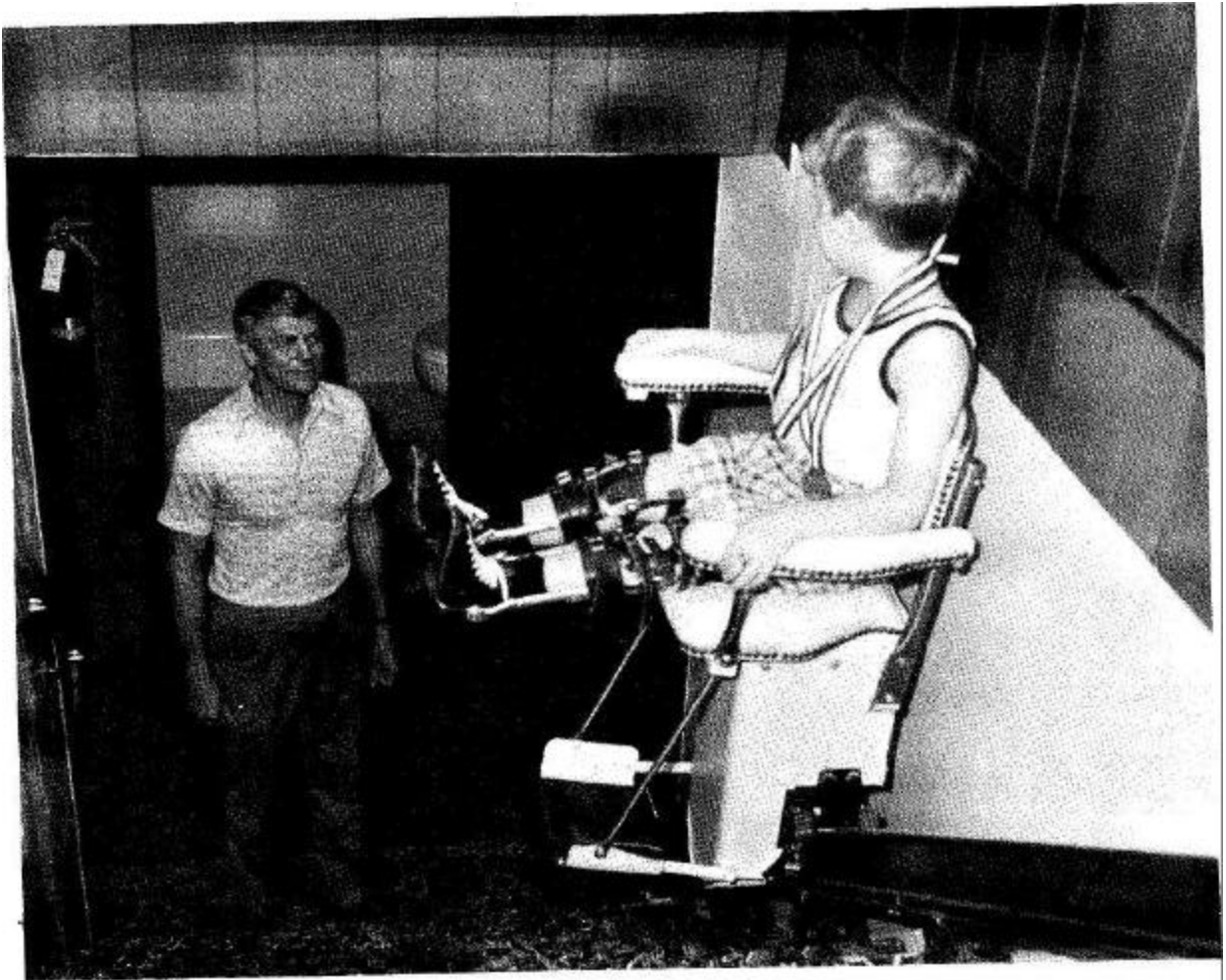
# Semi-Permanent Residence

*Multiply handicapped, retarded pre-teen age children*

*(Private, non-profit)*

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RESIDENT HOMES OF  
HAMILTON COUNTY, INC.  
2100 St. James Street  
Cincinnati, Ohio 45206



### **Facility, Residents & Staff**

A renovated brick home with six bedrooms located on a quiet residential street in a mid-western city is home to six multiply handicapped youngsters. The residents, between the ages of six and seventeen, are diagnosed as severe to moderately retarded and live as a family unit with house parents and aides in residence. The staff is assisted by professionals from the parent agency, and volunteers.

### **Program**

The intent of the program is to provide the children with a planned, long-term setting; to help them develop skills for community living and to give them the opportunity to participate in normal developmental experiences with surrogate parents and siblings. Following an extensive interdisciplinary evaluation, each child enters into a daily comprehensive educational and developmental program designed specifically to meet his needs.

The program is conducted either at the parent agency's day program which is under contract with the County Board of Mental Retardation or through special education classes. House parents and aides provide additional individualized care to stimulate the development of personal grooming and self-help skills.

### **Administration**

The home is administered by the Resident Home for the Mentally Retarded of Hamilton County, Inc. and is the second group residence to be operated by this non-profit corporation. It is considered a satellite facility and is under the administration of the director of that program. It is licensed as a group home by the Ohio Division of Retardation, with inspection and approval of city and county safety, health and zoning officials.

In addition to the volunteer board of directors of the parent organization, the group home has its own advisory committee made up of members of the Resident Home and representatives of other community social agencies.

### **Costs**

Cost of operation averages out to \$6,250 per year per resident. Financial resources include purchase of service contract from the Division of Mental Retardation and Developmental Disabilities, monies from the county mental health/mental retardation board and monies raised by the parent organization.



# Children's Group Home

*Severely handicapped, non-ambulatory, non-verbal 5-16 year olds  
(Profit-making)*

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LORI KNAPP FOUNDATION, INC.  
216 West Cass Street  
Prairie du Chien, Wisconsin 53821

## Facility, Residents & Staff

The Lori Knapp Home serves eight retarded and developmentally disabled children between the ages of five and sixteen. Four of the eight children, including the owner's daughter, are multiply handicapped, non-ambulatory, non-verbal, retarded and have cerebral palsy.



The residence is a modern, five-bedroom, prefabricated house, built in two sections at a factory in Prairie du Chien with special modifications. It is equipped with an electric chair-elevator attached to the stairwell and has specially equipped bathrooms.

The staff includes paid full-time house parents who are responsible for home training and care, two part-time assistants and a cook. The staff is augmented by social workers from the Central Wisconsin Colony, the local developmental center and the services of the family physician and general hospital.

## Program

Six children participate in daily public special education classes in the community, and two attend the Personal Development Center, sponsored by the local association for retarded citizens. The local school district furnishes transportation.

An on-going program of inservice training and supervision for the house parents and assistants is provided by Central Colony.

The Developmental Center provides a home training specialist and speech therapist.



The children participate in a variety of social and recreational programs made available to them in the community. They swim at a local high-school pool, go into the community on regularly scheduled shopping trips, go on camping trips, and attend social functions under sponsorship of the local association for retarded citizens.

#### Management

The home is privately owned by the Lori Knapp Foundation, a family corporation. The facility is licensed as a "family care home."

#### Costs

The land, building and furnishings cost the Knapp family \$47,000, inclusive of special modifications and equipment. The central air-conditioning, heating and hot water equipment are housed out-of-doors as a special safety measure.

The Wisconsin Division of Family Services pays at a base rate per child, \$350 monthly. In addition, the costs of therapeutic and restorative services, clothing and personal needs bring monthly costs to from \$405 to \$485 per child.



# Residential Care Hostel

*Pre-teens and children who function below the mild level of retardation*

*(Private, non-profit)*

---

11th STREET HOSTEL  
423 West 11th Street  
Pueblo, Colorado 81003

## Facility, Residents & Staff

The Hostel, established in December 1972, is in a residential area of Pueblo. It is a two-story building, with six bedrooms and three baths, large living room, dining room, recreation room and sewing room. After purchase and renovation to meet State licensing requirements, the home was leased by the Pueblo Inter-Agency Residential Services Board, and serves six children, between ten and thirteen years of age.

Intake is limited to pre-teen and the resident must function below the mild level of retardation. The children manifest a variety of behavioral and functional problems.

The parent organization also operates other community residential facilities. In addition to the supervisory, consultative and administrative function performed by the parent agency, the staff at the hostel includes "teaching parents" and an assistant who lives in. Additionally there is a housekeeper, a training specialist and an inservice training director.

## Program

The focus of the hostel's program is to provide the children with social and recreational skills needed to participate in community

activities. The children attend a program at the Pueblo Community Center School, funded by the State of Colorado for lower functioning, retarded children from pre-school age through eighteen, who require behavior modification and special assistance not available through the public school special education classes. The children also participate in relevant community sponsored programs of recreation and education. Some attend classes at the Y, others attend classes at the Community Fine Arts Center, some are enrolled in a community sponsored Training Foundation for remedial tutoring in reading and writing. Counseling and other services are provided by State employed social workers and other local agencies as required.



## Management

The hostel is under the supervision of the director of the Pueblo County Inter-Agency Residential Services Board for Retarded Citizens, Inc., a non-profit agency under the direction of a board of directors. The hostel is licensed by the State as a "residential care home" and meets local and State fire, safety and health regulations.

## Costs

The cost of the program per child is \$481.00 monthly, funded through 80% State funds and 20% community welfare funds.



# Group Residence

*Severe to moderately retarded pre-teens*

*(Public agency)*

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VICTORY HOUSE  
702 East Victory Drive  
Savannah, Georgia 31405



## **Facility, Residents & Staff**

The House is a classic old Southern family home with 14 rooms, 3 baths, a large screened front porch, and is located in an upper middle-class neighborhood of Savannah.

The residence presently serves eight moderately retarded boys and girls ten to thirteen years old, all of whom were previously institutionalized in State facilities.

The staff includes three resident house parents and two part-time house parents. In addition, the Comprehensive Mental Health Center provides social work and psychological services. Many volunteers from the community participate in the project.

## **Program**

All the children attend either the community-sponsored training center or public school special education classes during the day. They also participate in recreation programs initiated by the community.

The home training incorporates the principles of normalization; the children routinely accompany the house parents on shopping trips, take part in meal preparation, maintain their own rooms and are given individual training in self-help skills. The parents focus on providing a family atmosphere, and as a

family group they go camping, fishing, go to the beaches for picnics and cookouts, and attend churches in the community, interacting as any family would with the community.

## **Management**

The home is a public agency under the sponsorship of the Comprehensive Mental Health Center for Chatham County, a sub-division of the Georgia Department of Human Resources. It meets the standards set by the State for occupancy as a "group home." The project has an advisory board composed of professionals from community health agencies, teachers and representatives from the community's civic and social agencies.

## **Costs**

The budget for 1973 was \$40,854 and is part of the Mental Health Center's regular operating budget.

# Short Term Behavioral Shaping Residential Unit

*Severely and profoundly retarded teenagers*  
(Public agency)

---

BEHAVIOR SHAPING UNIT  
5016 California Street  
Omaha, Nebraska 68132

## Facility, Residents & Staff

A large older home situated in a typical residential neighborhood of Omaha serves as a behavior shaping unit for eight severely to profoundly retarded boys and girls between ten and twenty years of age.

The home has large living and recreation rooms on the first floor, which also houses offices and a staff apartment. The second floor has five bedrooms and baths. Additional staff apartments are located on the third floor. The basement level of the home includes a dining hall, kitchen and utility rooms.

The staff is made up of a director, a secretary, four live-in counselors, two full-time teachers, seven teacher aides, a cook and a housekeeper. The school program is conducted in an annex connected to the residence.

## Program

The program is designed for short term placement with intensive 24-hour training to attain skills necessary to return home from an institution or to be able to live in another type of community residential facility.

Intensive, inservice training of staff is conducted by the director of the unit. The staff use various behavior modification techniques including operant conditioning and precision teaching.



The training and school programs are designed to develop social and self-help skills, language and control of disruptive behavior and individualized training necessary to move into community school or vocational training programs.

In addition, there are regularly scheduled, supervised trips for recreation and shopping.

### **Management**

The home is a public agency operated under the auspices of the Region VI Eastern Nebraska Community Office of Retardation. The program is certified as an "educational center." As a State agency, it is governed by laws and regulations, as contrasted to private agencies governed by boards and charters.

### **Costs**

Budget for fiscal 1973 was \$116,000 which includes all staff salaries, maintenance of the residence and training annex, food, utilities and support of the residents. These funds are derived from county, State, and Federal governments and the Greater Omaha Association for Retarded Citizens and from some parents of residents who have the ability to pay, contributing a proportionate amount of residential costs.





# Community Residences for Adults

Older adolescents and young adults are expected to leave home and establish their own residence. It is their act of doing so which usually denotes they have attained a significant degree of independence and a level of maturity necessary to function as an adult.

Adults who continue to live with their parents are often frustrated in their quest for independence, since it takes an unusually sensitive parent to accept any offspring as a mature adult. It is understandably even more difficult for parents of retarded people to "let go." However, it is important that they do. In most instances, older adolescents and young retarded adults who have had good nurturing and who maintain normal contact with their parents, fare better in life when

they live away from home.

Like their siblings and peers who are not retarded, they should be expected to leave the nest. Parents have every right to plan that they will leave and the retarded person at the age of maturity has privilege to leave. However, when there is mutual agreement between the parents and retarded adult offspring and with inter- and intra-personal relationships in balance, continued residence in the natural home can be beneficial to both.

Again, in keeping with the principle of normalization and in acceptance of the belief that living in small groups generates contentment and stimulates development, this next section presents examples of community homes for retarded adults.



# Transitional Group Residence

*For people in wheel chairs*

*(Public agency)*

LAKE HOUSE 2010

Mahan Drive Tallahassee,  
Florida 32303

## Facility, Residents & Staff

In keeping with the Florida Division of Retardation's policy that no State employees should be occupying quarters at State expense when institutions are over-crowded, the director has not occupied his official residence since 1972. Instead, it has become stages two and three in a four-stage program to integrate institutionalized, retarded, non-ambulatory adults into the community. It is a project under the auspices of the Tallahassee Regional Retardation Office which also administers a state institution.

The house is a 10-year-old, brick, four bedroom ranch type home located in a middle income neighborhood and includes the usual array of living, dining, and utility rooms.

The residents, two men and five women, are in wheelchairs and range in age from 20 to 40. They were all institutionalized at an early age and at one point were considered severely to moderately retarded. In reality, the regional director believes that if community programs had existed earlier and if the residents had had normal exposure to society, they would not have been considered retarded.

The residence is supervised by a married couple who occupy a wing of the house. They are relieved by volunteers.





## **Program**

Originally, as phase I of the project, the residents received intensive community preparation at the State school where they resided. In addition to the usual academics, they were given the rudiments of homemaking, were taught various self-help skills, and learned to care for their own personal needs. They were also introduced to various mechanical aides and were taught wheelchair mobility. The second phase was an on-site training period in independent living. It involved the staff and "students" going to the residence during the day where the future residents learned how to cook, make beds, bathe, clean house, shop, and do laundry. The third phase is the current period and involves the residents living semi-independently, but dependent upon one another, under the watchful eye of somewhat detached supervisors. The final stage will be the residents moving to a home of their own with only occasional assistance from paid staff or volunteers. The director feels that in most instances the residents probably will

have to choose a mobile person for a roommate, although a project in New York City has met the problem in a different way.

One of the residents works as a receptionist/messenger (motorized wheelchair) for the State of Florida and the rest are employed at a community activity center.

## **Management**

The home is under the auspices of the Regional Mental Retardation Office of the Florida State Division of Retardation. It meets all the fire, safety and health codes and regulations.

## **Costs**

The monthly budget is roughly \$1,000 to \$1,200 (distorted because the facility is publicly owned and utilities are purchased by the state financial system).

# Transitional Group Home

*Collaborative efforts between State Office of Mental Retardation  
and College (Public agency)*

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## SARASON HOUSE

c/o Central Connecticut Regional  
Center  
Underclift Road  
Meriden, Connecticut 06450

### **Facility, Residents & Staff**

The residence is an eight-room house located on the outskirts of the Central Connecticut State College campus. It is owned by the college which has loaned it to the Regional Center for a group home. The program serves six young men who function on a moderate to mild level of retardation and who have been referred through the Division of Vocational

Rehabilitation, the State mental hospital, public schools and the Regional Center.

The home is staffed by a resident "house father" who is a full-time State employee. Graduate students act as counselors and give special assistance to the residents in money management and social behavior .



**Program**

All of the residents are employed either in sheltered workshops in the community or by private business. The Central Connecticut Regional Center provides social services and programs designed to help develop social and living skills. The college and the Center have developed an on-going program of behavior shaping and behavior modification. In addition, the residents have been given a non-matriculated student pass which allows them to participate in many of the campus activities.

**Administration**

The home is sponsored by the State Office of Mental Retardation and meets regulations established by that and other State agencies.

**Costs**

The total budget is \$19,500 per year, which does not reflect a true cost since the college charges no rent and maintains the premises. The budget is part of the Regional Center's operating budget and includes \$12,000 for staff salaries. The residents are charged a fee according to their ability to pay.



# Transitional Hostel

*Various disabilities including retardation and mental illness (Private, non-profit)*

---

ELMER LUX HOSTEL 119  
Halbert Street Buffalo, New  
York 14214

## **Facility, Residents & Staff**

The hostel was originally built as a dormitory to house handicapped persons from throughout western New York State who were attending educational and vocational classes in Buffalo. As training programs and schools developed in the smaller communities, the need for the dormitory declined. The United Cerebral Palsy Association of Western New York purchased the facility in September 1973 to be used as a transitional hostel, to house and train participants enrolled at their vocational rehabilitation center in the development of skills necessary for independent living. The residence continues to house persons with a variety of disabilities including severe physical handicaps, social and emotional problems and some who are retarded.

Sixteen men and women share the facilities, including a central dining room and recreation rooms. Each resident has a bedroom and shares a bath located between the rooms.

The staff consists of a director, two assistant directors (a married couple who live in), a part-time cook, a part-time secretary/bookkeeper, two full-time counselors, one part-time recreational coordinator and a nurse's aide.

## **Program**

The hostel's program centers around assisting the residents to develop the skills necessary to live more independently. This includes personal help in developing the skills necessary for good personal grooming. The residents are taught cooking, cleaning house, budgeting, marketing and time management. They are helped to develop good work attitudes and to improve their self image, in addition to being taught how to utilize the community resources and to make good use of their leisure time. The hostel's staff also supports the formal day training and performs various tutorial services. Most of the residents are also in training at the Niagara Frontier Vocational Rehabilitation Center.

## **Management**

The residence is administered by the United Cerebral Palsy Association of Western New York, a private non-profit, multi-service agency governed by a board of directors. The hostel holds two licenses, a "Multiple Dwelling" license and a "Certificate of Occupancy." It complies with local and State fire, safety and health regulations.

## Costs

The cost per resident is \$5,700 per year which includes room and board, recreational and leisure time activities, linen, counseling, medical supervision and laundry. About half the costs are paid for by the residents' resources, such as Supplemental Security Income and the other half is a grant from the State Department of Mental Hygiene.





# Group Residence

*Blind, retarded men*

*(Private, non-profit)*

---

SUNLIGHT HOUSE 114  
Branch Street Scituate,  
Massachusetts 02066

## **Facility, Residents & Staff**

Sunlight House was originally a large, private estate, located in a small Massachusetts community close to Boston. Purchased by the Massachusetts Association for the Blind more than twenty years ago, it has provided programmed recreation for institutionalized blind, multiply handicapped and retarded adults.

Since January, 1973 Sunlight House has been the residential setting for eight retarded/blind adult men between 26 and 51 years of age, who were previously institutionalized.

The men live in double or single rooms and are individually responsible for taking care of their own room and laundry. They share responsibility for maintaining the common lounge and dining areas.

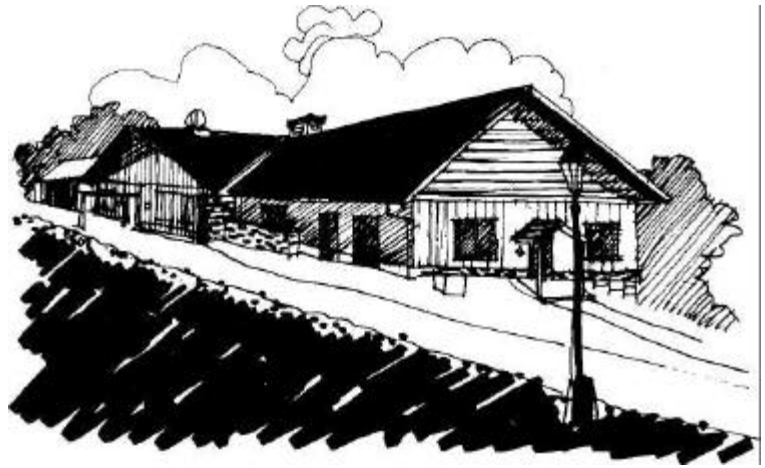
Staff is made up of two full-time, live-in house managers who supervise evening and weekend activities, two full-time teachers, two part-time teachers, one part-time social worker, a part-time project director, and several volunteers.

In addition, Sunlight House has an adult vacation program that serves as a vacation-recreation facility for nearly 200 blind adults who come for two-week periods through the summer and over Christmas and New Year's holidays.

## **Program**

All program activities of Sunlight House are designed to provide a normalization of life style and to develop individual capabilities. Supplementing the work of the house managers and program specialists, a social worker regularly provides individual and group counseling.

A program of classroom, community and workshop activities is staffed by a full-time master teacher and four part-time assistants. The educational curriculum is developed in six-week blocks and evaluated and repeated for those who need follow-up.



Elements of the curriculum include use of the telephone, filling out applications for employment, bank accounts and other forms required in independent living, practical first-aid and personal hygiene.

Other areas included are community activities and rights as a citizen, mobility in travel, work skills geared toward employment in the community, use of money, written communication and participation in a wide variety of community activities.

### **Administration**

Residency and expanded summer vacation programs are under the direction of the Massachusetts Association for the Blind, a private non-profit agency. The State Department of Mental Health contracts with the Association for the residential and program services. In addition to representation from

State and local public agencies, the Association's board has representation from local Associations for Retarded Citizens and civic and community organizations from across the State. The Sunlight House program is accredited by the National Accreditation Council for Agencies Serving the Blind and Visually Handicapped as well as by the local and State fire, safety and health agencies.

### **Costs**

The operating budget for the adult residential program is \$56,000, which includes professional salaries, room and board and training of residents. Of this amount the State Department of Mental Health provided \$32,000; residents' individual shares through funds paid them by Aid to the Blind and/or Social Security benefits was \$18,000, and an additional \$8,000 was contributed by the Massachusetts Association for the Blind.

# Service Club Group Home

*HUD grant (Private,  
non-profit)*

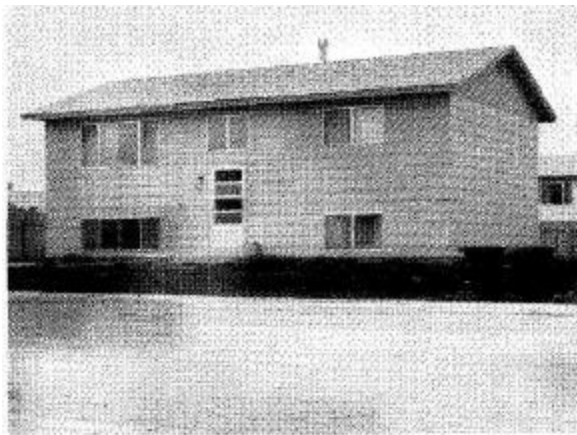
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CIVITAN GROUP HOME  
c/o Civitan Club #1175  
Box 1429 Casper,  
Wyoming 82601

## **Facility, Residents & Staff**

The home is a one-year-old, bi-level structure with four bedrooms (two on each level), and two baths, a living room, kitchen, recreation room, and laundry room. The house is located in a small suburb, two miles east of Casper,

Wyoming, a community of moderately priced homes. Four men and two women live in the house. All are ambulatory and possess some self-help skills. There are two houseparents in the home full-time. Social services are provided by the Wyoming State Training School.



## **Program**

The home provides an environment conducive to learning everyday living skills. Residents participate in chores around the house. Several of them maintain jobs in the community, while the others attend vocational training courses, sponsored by the Public School System and the Department of Vocational Rehabilitation. These vocational training courses and sheltered employment activities are unique, for they are under the auspices of the Public School System, with no age limit. The residents also have ample time for leisure-time activities which include attending church services and social affairs, shopping trips, athletic contests, and musical groups, among others. Transportation is provided by a bus, originally funded by a grant from the Department of Mental Health and Mental Retardation.

## Management

The home was purchased by the Civitan Club under the FHA 235 Program which provides partial subsidization and a relatively low-interest loan. There are no property taxes; water and sanitation services are furnished free by the City of Casper. A separate corporation was set up for this group home. The home is governed by a Policy Board of 5 members which includes Civitan members, as well as an attorney and the Executive Director of the local United Fund. In addition, there is a Board of Advisors which includes the Superintendent of Schools, a field representative from the Wyoming State Training School and a member from the Family Living Center Extension Service of Wyoming University.

## Funding

Funding for room, board, and clothing is through parents, guardians, the Supplemental Security Income, the Civitan Club and other means. Medical costs are covered by the Wyoming State Training School, parents or guardians. The yearly budget for 1974 through May 13th was \$16,735. Of this amount, \$5,839.75 was for the purchase of the bus and its operating expenses.



# Apartment Complex

*Mild to moderately retarded adults*

---

SALVATION ARMY COMMUNITY  
LIVING PROJECT  
3421 36th Street  
Number 15  
San Diego, California 92104

## **Facility Residents & Staff**

A new 28-unit apartment complex, sponsored by The Salvation Army in cooperation with the San Diego Housing Authority is rented to mentally retarded tenants who are learning the skills necessary for independent living. Several of the individuals had lived in deteriorated hotels or were residents of large institutions; all function in the moderate to mild range of retardation. The tenants live alone in one-bedroom or studio units. The complex is located in a regular multi-dwelling neighborhood and was built by an individual who later leased it in its entirety to the City Housing Authority. It is close to bus lines, shopping centers and recreational areas. All of the residents are involved in outside programs during the day. Several are employed in either competitive or sheltered employment, others attend activity centers or adult education classes. The staff includes three resident counselors, a married couple and a single person who each have their own apartment. In addition, there is a part-time project coordinator and a full-time social worker.

## **Program**

The project is considered transitional with a major objective of training the residents through actual experience to live independently, within a six-month to two-year period. The counselors, on a weekly basis, give individual assistance and instruction in budgeting, cooking, cleaning, laundry and shopping. The training is part of a pre-admission agreement between the agency and the tenant, and continues until the tenant demonstrates an ability to perform these tasks satisfactorily. Also, at the time of admittance to the project, the resident agrees to weekly meetings with the social worker and agrees to attend a weekly group meeting. The sessions include such topics as sex education, civil rights, and social behavior. Follow-up support services are available to "graduates" of the program.

## Management

The project is under the direction of the Salvation Army of San Diego. It demonstrates a new service direction for that organization; no other unit of the Salvation Army has conducted a program specifically for retarded people. In addition to providing direct service to the residents, the staff coordinates the residents' relationships with the Housing Authority and other service agencies. Other than having to meet the usual multi-dwelling regulations, the home needed no special licensing.

## Costs

The costs of rent to the residents is one-fourth their monthly income. This expense, along with food, clothing and personal items is met by the resident through Supplemental Security Income or his salary from employment. The Salvation Army's cost of administration and services is \$143 a month per resident which is met by reimbursement for services from the State Department of Health, Social and Rehabilitative Service, contract for services from the State's Regional Center, the United Way and from other Salvation Army resources.



# Transitional Apartment Complex

*Moderate to mildly retarded adults-limited supervision*

*(Public agency)*

MANSFIELD TRAINING SCHOOL

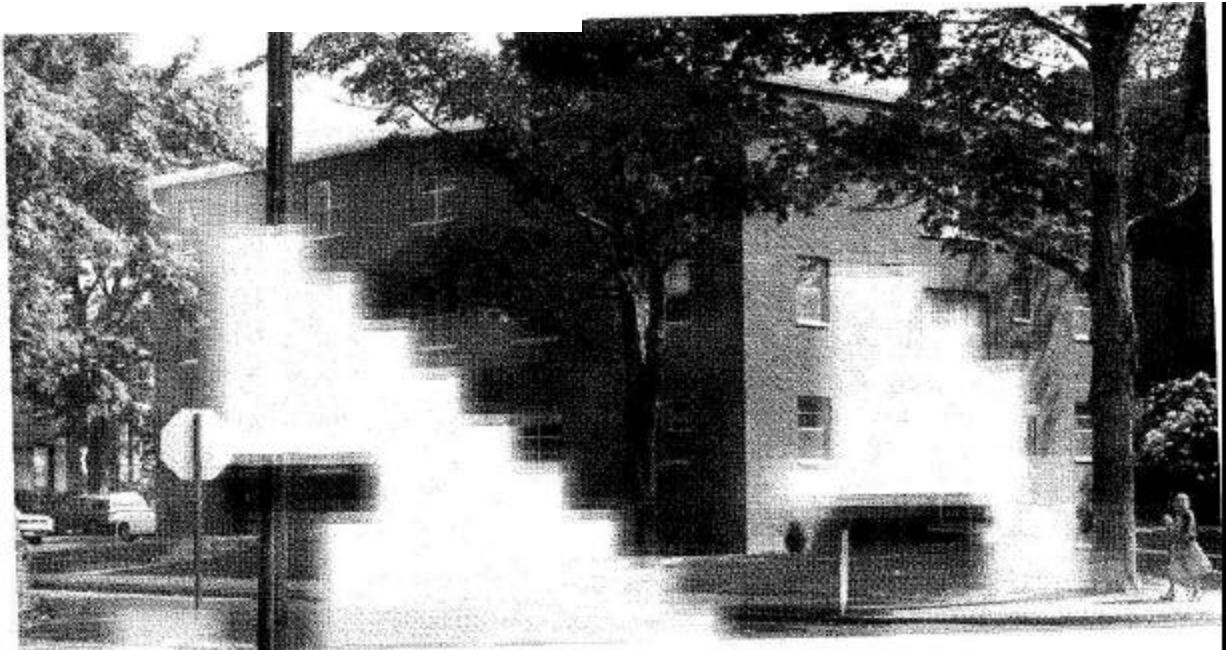
Box 51

Mansfield Depot, Connecticut 06051

## **Facility, Residents & Staff**

The apartment building is newly constructed, has fifteen units, is located in the center of Hartford, Connecticut and is easily accessible to most of the services the city offers. It is privately owned and leased in its entirety by the Training School. Each apartment has a bedroom, living room, kitchen and bath. Fourteen of the apartments are occupied by 28

retarded men and women who function on a moderate to mild level of retardation and one apartment is occupied by 3 live-in supervisors. In addition, the social service staff at Mansfield serve as primary support specialists to the resident staff.



## **Program**

Mansfield Training School uses the apartment house as the final step in the transition from institution to independence. All of the residents in the building are employed (except one to be discussed in a later section) and most have reached the level of normal self reliance. Many are enrolled in adult education programs offered by the local high school and are learning to drive and improve their cooking skills. They require the very minimum of supervision, live alone, do their own shopping, cook, clean and maintain their own quarters. The staff visits their apartment only occasionally but are always available to support the residents and to give special assistance if required.

## **Administration**

No special license is required but the building meets all the local health and fire safety codes for multi-occupancy structures. It is administered by the director, and his delegates, of the Mansfield State Training School, a State public agency governed by laws and regulations.

## **Costs**

The apartments cost \$225 per month per unit which includes utilities. In addition the cost of staff is \$18,000. The entire operation is part of the State school budget. However, part of the costs are reimbursed by the clients who pay a sliding scale fee of up to \$100 per month. The cost of telephone, food, and personal items is the responsibility of each resident. Connecticut has done a recent cost analysis and concluded that community residential and training programs generally are about 60% of the cost of institutional care.





# Scattered Apartments

*Semi-independent living for severely to mildly retarded adults (Private, non-profit)*

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CRANSTON CHAPTER FOR RETARDED  
CITIZENS  
665 Dyer Avenue  
Cranston, Rhode Island 02903

## **Facility, Residents & Staff**

Operating on the theory that housing retarded people in clumps of houses or apartment complexes affects their ability to live normal lives, this project is actually nine dwelling places scattered throughout the city: eight apartments and one house. Since 1970, 35 retarded men and women who function on levels considered severely to mildly retarded have been sharing the living units, three to six to a residence. The residences are unstaffed but a staff homemaker either visits or telephones on a regular, sometimes daily basis. Other staff members are always on call.

The total staff of the project includes a director, two full-time homemakers, two part-time homemakers, and a "limited time" nurse and teacher. The nurse is on duty from 9:00 am to 2:00 pm five days a week and the homemakers' regular hours are from 3:30 pm to 11:30 pm, seven days a week.

## **Program**

Like their counterparts in other community housing, the residents of the Cranston project either work in private industry or are employed at the Center's Workshop. The program includes training in home maintenance, the use of public facilities, shopping, the handling of money and instructions in the host of skills required in independent living.

A unique aspect is that the residents learn while doing, since most come directly from the institution. Individuals are taught the skills with guidance on a modified trial and error basis while actually residing in the community. Residents are carefully assigned to living units with relatively dependent people placed with a group which includes relatively independent people. As a result of this matching, the residents teach each other.

## **Management**

The apartments and house are not licensed as a special facility, but meet the local zoning and multi-dwelling regulations. The project is under the director of the Cranston Chapter for Retarded Citizens, a private non-profit, voluntary, board-governed agency.

## **Costs**

Salary for staff and other program related costs are \$40,000 per year which is met in part by a grant from the State Division of Retardation and resources of the sponsoring agency. The apartment rents, food costs and other living expenses are shared equally by the residents themselves supplemented by the S. S. I. program. Apartment rentals run from \$185 to \$300 per month.

# Apartment Complex

*Non-retarded senior citizens and young adults*

*(Profit - making)*

---

## CENTURY HOUSE GROUP HOME

1111 4th Street, N.E. Auburn,  
Washington 98002

### **Facility, Residents & Staff**

Twenty-three adults live in furnished apartments in a garden apartment complex which also rents to 40 non-retarded senior citizens. Groups of four retarded tenants share two-bedroom apartments which include a living room and utility kitchen. The management operates a central dining room, central recreational and leisure time program and provides nursing, occupational therapy and recreational services as needed. A physician is on call 24 hours a day.

### **Program**

All of the retarded tenants are employed full time in private industry or sheltered employment. They participate in the management's leisure time and recreational activities along with their senior citizen neighbors. They also take part in social and self-help training programs sponsored by the community's Mental Retardation Board. They attend special academic classes sponsored by a local college and participate in public recreational programs in their community. The management provides self-help and money management services. A social worker from the regional State school visits on a regular basis and has assisted six individuals in establishing their own separate apartments. Ten "graduates"

continue to participate in many of the social and recreational activities of the apartment complex, but otherwise live independently.

### **Management**

The residence is privately owned by a nurse who occupies one of the apartments. It is certified as a "group home" and is regulated by several local and State public agencies. In addition, there is a five-member advisory board which includes a clergyman, a physician, a lawyer, a local business man, a public school teacher and a social worker from the State institution.

### **Costs**

Each resident pays between \$225 and \$250 monthly, from income derived through Supplemental Security Income and Social Security payments. Included in this monthly cost are three meals a day, laundry, complete medical and hospital coverage and training in self-help and money management.

# Group Residence

*Blind and physically handicapped retarded men  
(Private foundation with public agency)*

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REYMANN HOME  
403 Canton Road  
Akron, Ohio 44312

## **Facility, Residents & Staff**

The house is an older home situated in a quiet residential neighborhood of Akron. It was built by the Reymann family as a residence for themselves and their 16 children. In February 1973, the Reymann Foundation leased the house at a nominal fee to the Summit County Board of Mental Retardation. The home has a large living, dining room and kitchen on the first floor as well as staff quarters and office space. In addition, there are six bedrooms and two baths on the second floor, and two large recreation rooms and a bath in the basement.

Fourteen retarded men between the ages of 16 and 56 live in the home. They have multiple handicaps such as blindness, retardation and severe physical disabilities.

The resident staff includes a full-time live-in supervisor, and six aides.

## **Program**

Each of the residents participates in the community Adult Services Program, which is a sheltered work program performing a variety of jobs from community industries. The clients are evaluated according to five different levels of work proficiency, and paid according to production. They participate in

a number of community activities, from bowling to visits to the amusement parks in the area. They go out to dinner at least once a week to a different restaurant, have boating and fishing provided through a community civic organization, and are encouraged to develop their own activities. Home training emphasizes self-help skills, and the residents are assigned regular household duties.

Ancillary services are provided through the Summit County Board of Mental Retardation as needed, with social work and remedial services provided through that agency's professional staff.

## **Management**

Although the Summit County Board of Mental Retardation, (a public agency of the county government) has the responsibility for policy and financial operation of Reymann Home, there is an active advisory committee. It is composed of five members: The Chairman, appointed from the Summit County Board of Mental Retardation; the President of the ARC; the Chairman of the Residential Services Committee of the local ARC; the supervisor of Reymann Home; and the Executive

Director of the Summit County Board of Mental Retardation.

The Reymann Home was licensed through the Ohio State Division of Mental Retardation and Developmental Disabilities with approval by the Akron fire, safety and health departments prior to occupancy.

#### Costs

A uniform fee schedule of \$10 daily per resident has been developed by the Summit County Board of Mental Retardation, with a sliding fee, reimbursement schedule for those with the ability to pay. Included in this daily fee are room, board and personal laundry. Payment for clothing, medical, recreational and personal expenses are the responsibility of the parents and/or the referring agency. Funding of the program is through a State Developmental Disabilities grant (70% of a \$60,000 budget) matched by funds from the County (about 20%), and about 10% from the residents themselves through Supplemental Security Income.



# Semi-Permanent Group Home

*Severely to moderately retarded adults*

*(Private, non-profit)*

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ARLINGTON GROUP HOME  
1027 North Edgewood Street  
Arlington, Virginia 22201

## **Facility, Residents & Staff**

The group home is a semi-permanent residence for three men and two women who are considered moderately retarded. The house is a 60 year-old, five bedroom white stucco, centrally located in a mixed residential-business district. Staff includes two resident house parents assisted by the sponsoring agency's day center staff and an advisory committee of professionals representing community agencies. Volunteers relieve the house parents and accompany residents on longer trips away from home.

## **Program**

During weekdays, all residents participate in day-time programs at the Arlington Activity Center or the Sheltered Occupational Center, where they are paid for contract services with community industries. In the evenings and on week-ends they participate in community recreational programs, attend sporting events, go to movies and concerts, go on camping trips and enjoy a number of social activities sponsored by community churches and local civic organizations. The house parents are responsible for teaching home-training and independent living skills. The ultimate goal is a more

independent living arrangement, although it is recognized that these residents may always need assistance.

## **Management**

The home is under the direction of the Arlington Adult Activity Center, Inc., a private non-profit corporation founded by the Arlington County Mental Health Board, a public agency. The Center has its own board of directors who are responsible for the group home and the Activity Center. It is licensed as a "group home" and meets the local, county, and State fire safety, health and zoning codes.

## **Costs**

The annual operating budget is \$25,000 of which \$7,000 is paid in fees by the residents with help from Supplemental Security Income. A \$9,000 grant from the State Department of Human Resources is matched by the Arlington County Mental Health and Mental Retardation Services Board. Additional financial support comes from donations.

# Permanent Residence

*Severely to moderately retarded women*

*(Private, non-profit)*

---

MAHER HALL  
10 Calvert Street  
Newport, Rhode Island 02840

## **Facility, Residents & Staff**

Maher Hall was established in 1967 as one of New England's first community residences for retarded adults under the auspices of a multi-service regional center for retarded people. The home is a seven-bedroom wooden frame building located on a residential street near the center city. The seven residents are women who have been evaluated as severely to moderately retarded with no restrictive physical problems. The home is staffed with a day supervisor and a night supervisor. They relieve each other on weekends, during vacation and holiday periods. The staff is supported by the professional staff at the Center's workshop.

## **Program**

All of the residents are employed full time at the Center's workshop where they also receive counseling and classes in aids to daily living. The home supervisors assist them in developing homemaking and personal grooming skills. They attend various recreational activities in the community.

In that Maher Hall is considered the permanent residence, for life, of the women who live

there, a great deal of emphasis is placed on family group life rather than training. The women recognize the residence as their home, share in the housekeeping chores and home planning, and take trips and vacations as a family unit and generally display a pride of ownership and obvious pleasure of being part of the group.

## **Management**

The home is under the direction of the James L. Maher Center, a private, non-profit, multi-service agency for retarded people. The Center is directed by a volunteer board of directors and a paid administrator. It is licensed by the State Department of Health as an Intermediate Care Facility and meets the fire, health, safety and zoning regulations of the local and State governments.

## **Costs**

An annual budget of \$24,000 is funded by a per diem rate of \$10.00 established and paid for by the State Department of Social and Rehabilitative Service.



# Community Residences for Older Adults

In old age many people find security and comfort in what is familiar, in routine and in maintaining or attaining positions of respect, acceptance and wisdom which usually accompany the senior years.

As one recognizes that time is "running out" that self-set goals may never be reached and as physical strength begins to decline, these social needs take on even greater significance. If the needs go unfulfilled, often the individual reacts by becoming cantankerous, child-like in his behavior and excessively dependent. Social rejection or loss of a familiar environment can also have the effect of speeding up the aging process, can cause

mental confusion and can result in costly nursing home care, or even early death.

Some professionals feel that the more dependent a person is in his early and middle years, the more severe his reaction to the aging process. Whether true or not, the purpose of this final section is to present programs which may decrease the trauma associated with the aging process for retarded adults. It presents projects which make it possible for retarded senior citizens to enjoy their later years as members of small groups and as members of the community and thus to have a sense of belonging and worth.





# Natural Home

*Retarded women sharing home  
(Private non-profit)*

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JAMES L. MAHER CENTER  
Hillside Avenue  
Newport, Rhode Island 02840

## **The Maher Plan:**

### **Preparing for the future**

Mary is 24, the youngest of seven children. She was born with Down's syndrome. She will never have to worry about a place to live; her place in the community during her later years is secure.

Her parents have arranged to have their family residence staffed as a group home after their death, and six to eight other retarded women will share the comforts of her home.

The house is comfortable and spacious, located on an ocean shore drive where the family has lived for the past 20 years.

During her adolescence and before the public schools in her State accepted persons who were diagnosed as "trainable," Mary attended a private residential school during week days, where she learned the elements of reading and writing and learned to function somewhat independently. Mary is now employed at a local workshop earning from \$10 to \$25 a week. She continues to attend classes in personal grooming and skills of daily living at her place of employment.

The advantages of the Maher plan are that the trauma of death will not be compounded with relocation of residence for Mary when her parents are gone; that her future is secure and planned; and six to eight other retarded persons are assured of a comfortable home and guidance in their mature years.



# Guardianship Trust and Home Program

*(Private agency)*

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THE GUARDIANSHIP TRUST AND  
HOME PROGRAM, INC. Province  
Road Barnstead, New Hampshire  
03218

## **The New Hampshire Plan:**

### **Preparing for the future**

**In** New Hampshire a group of concerned parents brought together some businessmen, lawyers and professionals in human services to address the problem of what will happen to their dependent retarded offspring "when something happens." The answer was the organization of Guardianship Trust and Home Program, Inc., a non-profit organization. The purpose of the corporation is to provide a vehicle through which programs could be operated to meet and solve the problems of retarded people who reside in the community once their parents are no longer able to provide for them. The goal, of course, is to develop a plan long in advance of the incident's occurrence, which can be an effective course of action.

In addition to acting as advocates and finding legal guardians when necessary, the organization provides residential alternatives to institutions and residential alternatives for the retarded person who is living with his parents. As another objective the agency is also establishing respite residential services for children and adults who live with their parents. The following are two case examples of how the trust operates.

Harold is 47 years old and retarded, but possesses a full range of self-care skills. His father died over 20 years ago. He lived a sheltered life with his mother until about eight months ago when she died at the age of 87. No guardian had been appointed for Harold, who inherited the family home, free and clear except for a small State welfare lien. Under normal procedures, Harold would have become a ward of the State. He would have been placed in the State School and his house sold by the State to defray the cost of his keep at the School.



Guardianship Trust presented their concerns to the court and as a result of their petition the court appointed a guardian. The Trust then contracted with the guardian to assume ownership of the home for Harold's continuing care and placed a staff person in Harold's home to live with him. In addition, he was enrolled in a training program for adults which is part of a local sheltered workshop. The changes in Harold are remarkable. He has turned from a shy, withdrawn, dependent person into an out-going individual, whose interest in others and sense of humor attest to the security and happiness his new family gives him. Two other retarded individuals have recently moved into the home.

John is a 48-year-old man who is considered severely retarded. He has no physical impairments and possesses most of the necessary self-care skills. His only living relatives are his mother, who has a heart condition, and an aunt who is his mother's older sister. Like Harold, before Guardianship Trust, the only option available to John upon the death of his mother was to be removed from the community and placed in a ward at the State School.

Recently, the mother's health has declined to a point where she has been considering selling the house and placing both herself and John in a nursing home. Guardianship Trust is proposing that in consideration for assuming ownership of the home, they will place trained staff in the home to care for both John and his mother for the rest of their lives.

John is being placed in a program similar to the program Harold is in with the expectation of the same progress as Harold has shown. In addition, one or two other retarded individuals will be placed in the home for continuing assistance and supervision.

The advantages of this plan, like the Maher Plan discussed earlier, is that it relieves the concern of parents as to "what will happen when. . . ." The retarded person remains in familiar surroundings throughout his life, a home is provided for other retarded people and capital outlay is minimal.

The Foundation for the Handicapped, a private United Way supported agency, located at 4409 Interlake Avenue, North, Seattle, Washington 98103 has been involved in similar work since 1963. It started out as a small organization concerned with giving birthday and Christmas parties for retarded people without families. It has now become a State-wide agency concerned with guardianship and protective services, in addition to general advocacy.

The State of Ohio, Office of Protective Services and Public Guardianship, Division of Mental Retardation and Developmental Disabilities, 65 South Front Street, Columbus, Ohio 43215 is a public agency established by law in 1972. Its specific goals include: (1) aggressive identification of mentally retarded and developmentally disabled people, (2) counseling as indicated, (3) coordination of services for individuals such as income maintenance and placement, (4) a computerized follow-along teaching program, (5) public guardianship and trusteeship and (6) public advocacy.

# Family Care Residence

*For retarded women over 60*

*(Private, profit-making)*

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1824 COTTAGE ROAD c/o  
Regional Retardation 1705  
South Gasden Street  
Tallahassee, Florida 32300

## **Facility, Residents & Staff**

One of Florida's projects in the deinstitutionalization of its State facilities is to find small community living arrangements for its older institutionalized residents. Three women in their 60s who had spent "a life time" in the institution have been making a successful adjustment to community living for over a year. One woman has restrictive use of her arms and another is legally blind. All were tested as moderately retarded.

The residence is a private home, and the three women share a wing of the house under the supervision of the owner. The owner also provides the meals but is assisted in cooking and household chores by the residents. There is no staff, but the residents have become popular with the neighbors and community and spend time with a great many individuals and are guests at many community activities.

## **Program**

There is no "program" as such. The ladies spend a leisurely retirement type of life which includes homemaking, shopping trips, eating out, sewing, attending community functions, visiting and taking commercial bus tours to points of interest.

## **Management**

The home is a private residence and as such, the owner is considered a "private vendor." It is licensed and supervised by State employed social workers.

## **Costs**

The Division of Retardation under two different authorizations pay \$200 a month for room, board and supervision, plus an additional \$25 for incidentals for each person involved in this type of community residential program.

**Note:** For many years this type of program has been a popular way in many States for institutionalized people to rejoin society. The key to its value lies in the acceptance of the individual as a full member of the family and community in which the residence is located. The case illustrated above is somewhat unusual because of the age of the residents, their physical limitations and the length of their institutionalization.

# Senior Citizen's Group Home

*(Public agency)*

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PROSPECT HOUSE  
c/o Mansfield Training School  
Box 51  
Mansfield Depot, Connecticut 06051

## **Facility, Residents & Staff**

Founded eight years ago, Prospect House is an older, colonial style frame house located in an upper middle-class neighborhood in Hartford. It has 14 rooms and a garage apartment and is home to 14 men. All of the men were once considered severely retarded, are between 50 and 70 years of age, and all were institutionalized—one man for 50 years. Included in the group are two residents who are deaf and mute. The staff consists of a married couple and a relief worker.

## **Program**

This was a special project undertaken by the administration of the Mansfield Training School to test the feasibility of community placement for senior citizen, retarded, institutional residents. One of the requirements for inclusion in the project was that the person must be over 50 and considered "non-productive." The house staff concentrated on normalization of the residents and, in addition, all participated in an intensive, federally funded, social and community adjustment program.

Men who once shuffled down the street holding hands now conduct themselves with much more mature, normal habits. All now attend

the regional center day activity and sheltered workshop programs; two are employed in private industry, and one has gone on to reside with a younger man in an apartment.

## **Administration**

The home is under the administration of the Director of the Mansfield Training School and is considered an annex of that State agency. It meets all local and State fire, health and safety regulations.

## **Costs**

The home's budget averages out to \$50 a week per resident which covers the cost of rental, utilities, food, laundry and staff salaries. Each resident has his own means of income through Social Security, or Supplemental Security Income or he is employed.

# Interdependent Apartment Living

*(Public agency)*

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MANSFIELD STATE TRAINING SCHOOL  
Box 51  
Mansfield Depot, Connecticut 06051

## **The Mansfield Plan**

George O'Neil was raised and lived and worked most of his adult years at Mansfield Training School. He is now 65 years old, retired and is considered a charter member of the school; he was among the first residents the day it opened in 1917. Up until seven years ago, he was considered severely retarded and the records indicated he had gone beyond his productive years.

George was one of the group of elderly institutionalized residents to be a part of a special project described in the preceeding case study. He not only successfully adjusted to life in the community but went on to find employment, move into an apartment and to retire on Social Security benefits added to by Supplemental Security Income.

George shares an apartment with another much younger retarded man, who was also a resident of Mansfield and who is deaf and mute.

It is considered a successful partnership with each man compensating for the other's deficiencies; hearing and voice in exchange for vigor and strength. George does the light housework and cooking while his roommate works full-time and does the shopping.



## POSTSCRIPT

In establishing community homes for retarded persons, planners should keep in mind that a home is a place to sleep, a place to eat, a place to find respite, a place to find acceptance and companionship, and a place to regenerate one's strength.

The less emphasis placed on "program," and the more emphasis placed on "home," the more successful the residence seems to be.

Too much reinforcement of day programs in the home, or emphasizing the training aspects of a community residential program may result in depriving the residents of the basic needs the home is supposed to meet.

Consequently, most formal training and education should take place outside the home. Whatever education, training and development that must take place at home should be done in a natural, informal fashion in an atmosphere of love, acceptance, and genuine human concern.

Any services which are not normally provided in people's homes, such as social work counseling and psychological testing, should be performed away from homes for retarded people, too.

Planning agencies should also be mindful of the number of people who will share the residence. Large community residential facilities, like the institutions they are intended to replace, have a tendency to become impersonal. When they are too big, a certain regimented, institutional routine can creep into the operation. Also, as staffs become larger, formal labor-management practices develop which take away from the home atmosphere.

As this book indicates, there is a need for a variety of community residences appropriate to the individual retarded person's requirements. And community services must be supportive of these homes. Well planned, multi-disciplinary developmental programs appropriate to each retarded person's age and level



of functioning are a necessary element in successful community living.

Any plan for housing should take into consideration the fact that the mentally retarded person, whether an infant, a child, an adolescent or an adult, is first a human being and only incidentally retarded. Though he requires specialized services, his basic needs are remarkably similar to those in his age group.

As an infant, the retarded child is best served in a family setting that offers stimulation, interpersonal relations, warmth and affection. As a child and into adolescence, he deserves the same opportunities to grow and learn as his peer group. As an adult, he should be afforded the same right to contribute, within his capabilities, to his own and to his community's development. And in old age, he deserves respect and the comfort and security that come from still being a part of a family or a small group, and of being a member of the community.

In short, he has a right to be a part of society—not apart from society.

PRESIDENT'S COMMITTEE ON  
MENTAL RETARDATION  
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